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## FACSIMILE TRANSMITTAL SHEET

**To:** Examiner Joseph M. Pelliam – Group Art Unit: 3742  
**FIRM/COMPANY:** U.S. Patent and Trademark Office  
**FACSIMILE NUMBER:** 703.872.9306  
**CONFIRMATION TELEPHONE:** 703.308.0858 (Receptionist) or  
703.308.1709 (Examiner)  
**FROM:** Anne Marie Leavy for Edward J. Lynch  
**DIRECT DIAL:** 415.371.2217  
**DATE:** January 20, 2005  
**USER NUMBER:** 5121  
**FILE NUMBER:** Docket No. R0367-01601  
**TOTAL # OF PAGES:** 11  
**(INCLUDING COVERSHEET)**  
**MESSAGE:** Attached is a Third Preliminary Amendment in connection with  
patent application Serial No. 10/658,911, filed September 10,  
2003.

*Please confirm receipt of this facsimile.*

**NOTE:** Original will NOT follow

**CONFIDENTIALITY NOTICE**

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JAN 20 2005

## PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of *Burbank et al.* ) Prior Application Examiner:  
 For: **TISSUE SITE MARKERS FOR IN VIVO** ) *J. Pelham*  
**IMAGING** )  
 Serial No.: 10/658,911 ) Prior Application Group Art  
 Filed: September 10, 2003 ) Unit: 3742  
 Atty. Docket No.: R0367-01601 )  
 ) **TRANSMITTAL**

**CERTIFICATE OF MAILING/FACSIMILE PURSUANT TO 37 C.F.R. §1.8**  
 I hereby certify that this these papers are being sent by facsimile to (703) 371-9306, addressed to Prior Application Examiner J. Pelham, at Commissioner for Patents, P.O. Box 1450/Alexandria, VA 22314-1450, on January 20, 2005, in San Francisco, CA.

*Anne Marie Leavy*  
 Anne Marie Leavy

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

1. Transmitted herewith for filing in the above-identified patent application is an Third Preliminary Amendment.
2. Claim Fee Calculation

No additional claim fee is required.  
 Amendment increases number of claims or multiple dependencies.

**Additional Claim Fee Calculation**

Description	Fee Code	Claims	Exempt	Rate	Amount
Independent Claims	2201	7 - 3 =	4 x	\$100=	\$100
Total Claims	2202	33 - 20 =	13 x	\$25=	\$325

**Total Fees Due ..... \$425**

3. Payment of Fees

Enclosed is a check for the total fees due in the amount of \_\_\_\_\_.  
 The Commissioner is authorized to charge any additional fees and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atty. Docket No. R0367-01601. A duplicate copy of this document is enclosed.

By *Edward J. Lynch*  
 Edward J. Lynch  
 Registration No. 24,422

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## PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of ) Prior Application Examiner: J. Pelham  
 Burbank et al. )  
 For: TISSUE SITE MARKERS FOR ) Prior Application Group Art Unit: 3742  
 IN VIVO IMAGING )  
 Serial No.: 10/658,911 )  
 Filed: September 10, 2003 )  
 Docket No.: R0367.01601 )

CERTIFICATE OF MAILING/FACSIMILE PURSUANT TO 37 C.F.R. §1.8

I hereby certify that these papers are being sent by facsimile to (703) 677-9306, addressed to Prior Application Examiner J. Pelham,  
 at Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22314-1450, on January 20, 2005, in San Francisco, CA.

*Anne Marie Leavy*  
Anne Marie Leavy

Commissioner of Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Please amend the above-identified application before examination as indicated  
 below: